2010 ELECTION CYCLE

Judicial Candidate REPORT OF RECEIPTS AND DISBURSEMENTS	Delbert Hosemann SECSETARY OF STATE
2016 Judicial Election Name of Candidate Jimmy L. Miller	JAN 1 0 2011 Campaign Finance
Address P. O. Box 209, Marks MS 38646 County Quitman	Secretary of State
Telephone Work 662-326-4223 Home 662-326-2829 Fax 662-32	6-3299
Contact Name Cathy H. Taylor or Jimmy L. Email Address jimmarks@bells Miller Office Sought Chancery Court Judge Place Three, Seventh Chancery Distr	outh.net
THIS REPORT REFLECTS THE DATA DUE ON JANUARY 10, 2011, AND, ALSO, TERMINATION REPORT, May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010)	IS THE
Julie 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010)	Mandata
	Mandata
October 10, 2009 Periodic Report (July 1, 2010, through September 30, 2010)	Mondata
Tovernper 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010)	Puncil Candidate
X January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010). Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to obligations	o terminate reporting
Gro Florida and All MPORTANT	

- Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall aubmit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code
- The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Fexed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

Total and a second of	1	ternized	+ No	n-itemized :		This Period		Calendar Year-To-Date
Total amount of contributions	\$	-0-	+\$	-0-	\$	-0-	\$	-0-
Total amount of disbursements	\$ 1	444.08	+\$	-0-	\$	1444.08	s	9,740.35
Total amount of cash on hand					\$	-0-	\neg	
Signature of Candidate	w	port and	to th	e best of my	know	1/1	lia true, 1/2011	accurate, and complete.
Authority: Refer to Miss. Code Ass. 249 40						Date		

Authority:Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penaltres: Failure to submit required reports, or failure to aubmit reports in accordance with statutory deadlines, or failure to aubmit valid reports shall result in fines of \$60 per day end/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Conditions for Statewide. State distinct, multi-country and all legislative offices should return force to Se Ad Jacob or fax to 601-355-1486 or 601-575-2816.

2. Conditions for country index and country district offices should return forms to their country Circuit Clark. county and all registative ciffices should return form to Secretary of State, Electains Covering, P. C. Box 178, Jackson.

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Name of Candidate confinementation _____ JIMMY L. MILLER Reporting period October 1, 2010 through December 31,2010, & TERMINATION

ITEMIZED DISBURSEMENTS

Mississippi Secretary of State	(Mo., Da	ie r, Year)	Amount of each disbursement this per
P. O. Box 136	1 ,	,	5
City, State, Zip Code		-	-0-
Jackson, MS 39205-136		1	5
Purpose of Disbursament (Optional)			
Qualifying Fee	Aggrey Year-to-	ate	5 100 00
LITTO THE PROPERTY OF THE PROP			100.00
Greenwood Commonwealth	(Mo., Day,		Amount of each
P. O. Box 8050	imed pak	1 war)	disbursement this perio
City, State, Zip Code			s -0-
			\$
Greenwood, MS 3893508050 Purpose of Distursement (Optional)	_/_	-	2
Newspaper ad	Annua	-	2
C. Full name	Aggrega Year-to-d	ate I	2,683.00
	Date	-	
The Sun-Sentinel	(Mo., Day,	(aar)	Amount of each
P. O. Box 250		_	disbursement this period
City, State, Zip Code	-/-/	_	s ₋₀₋
01		-	
Purpose of Diebursement (Optional)	_/_/	-1	
Newspaper' ad	Aggregat	. 1	
D. Full name	Year-to-da		1,036.55
The Tunica Times	Date	-	
Mailing Address	(Mo., Day, Ye	ari l	Amount of each liebursement this period
P. O. Box 308		5	
City, State, Zip Code	_'_'_	- 1.	-0-
Tunica, MS 39676	The second second	5	
Purpose of Disbursement (Optional)	''_	- [
Newspaper ad	Aggregate	5	
E. Full name	Year-to-date		745.00
The Quitman County Democrat	Date	+	AMERICA CONTRACTOR
Mailing Address	(Mo., Day, Yes	r) di	Amount of each abursement this period
P. O. Box 328	Carried States	5	Dotted aug street
City, State, Zip Code			0
Marks, MS 38646		5	
urpose of Disbursament (Optional)		1	
Newspaper ad	Aggregate	5	
Full name	Year-to-date	17.00	80.00
Brenda Wiggs, Circuit Clerk	Date	+	
elling Address	(Mo., Day, Year)	diet	Amount of each pursument this period
220 Chestnut Sudan /		1	
ly, State, Zip Code	'_'_	1 -()-
Marks, MS 38646	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5	
rpose of Disbursement (Optional)	''	1	
County Voter Roll	Aggregate	5	
inter VOTT	Year-to-date	2.	0.00

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Name of Candidate on Communities JIMMY L. HILLER Reporting period October 1, 2010 through December 31, 2010 & TERMINATION

ITEMIZED DISBURSEMENTS

S&H Office Products	(Mo., Day, Ye	Amount of each disbursement this per
P. O. Box 520		8xxx 182188 Error.
City, State, Zlp Code	=	
Southaven, MS 38671	_'_'_	\$0
Purpose of Disbursement (Optional)		
Campaign Materials	Aggregate Year-to-date	731.44
Postmaster, U.S. Postal Service	Date	Amount of each
Mailing Address	(Mo., Day, Yes	disbursement this perio
423 Poplar	10 / 25 / 1	
City, State, Zip Code		
Marks, MS 38646	_/_/_	5
Purpose of Distursement (Optional)		
Compaign Mailout	Aggregate Year-to-date	5
C. Full name		380.60
Miller Law Firm	Date	Amount of each
Meiling Address	(Mo., Day, Year	disbursement this perior
P. O. Box 209	//	s 0
City, State, Zip Code		
Marks, MS 38646	/_/_	3
Purpose of Disbursement (Options) Reimburse campaign postage	_	-
erroneously bought dut of the Attorney Account	Aggregate Year-to-date	55.44
"Q" Magazine		
Mailing Address	(Mo., Day, Year)	Amount of each
	(mo., bay, rear)	diebursement this period
P. O. Box 368	_'_'_	\$ 0
		-
Marks, MS 38646	-'-'-	5
383 Co. (1975)		
Local Magazine Ad	Aggregate Year-to-date	200.00
	Date	
By U Magazine	(Mo., Day, Year)	Amount of each
P. O. Box 44	1,,,	disbursement this period
Ry, State, Zip Code	-'-'-	s ₀
ACTION CONTROL SECTION CONTROL		5
Darling, MS 38623	-'-'-	
Local Magazine Ad		
Full name	Aggregate Year-to-date	1,500.00
POTSTATION IN THE PROPERTY OF THE POTS AND ADDRESS OF THE POTS ADDRESS OF THE POTS AND ADDRESS OF THE POTS ADDRESS OF THE POTS ADDRESS OF THE POTS ADDRESS OF THE POTS ADDRESS	Date	
Hunter Paper Products	A CONTRACTOR OF THE CONTRACTOR	Amount of each
2790 Martin Luther King	1	disbursement this period
. Siets, Zip Code	-'-'-	0
Clarksdale, MS 38614	1-1-1-13	
		The second second
Campaign Supplies	Aggregate 5 Year-to-date	136.32
ge 2 of 6th Report due /10 /2010 20	1 mail-10-0519	100122

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Name of Candidate SXIDSHINGROOK JIMMY L. MILLER

Reporting period October 1, 2010 through December 31, 2010, & Termination

ITEMIZED DISBURSEMENTS

A Full name Lin Riley	(Mo., Day, Year)	Amount of each disbursement this period
Maling Address 246 Leave Road		5
City, State, Zip Code Sledge, MS 38670	10/ 31/10	\$ 400.00
Purpose of Disbursement (Optional) Distribute campaign flyers. Different towns	Aggregate Year-to-date	\$ 400.00
B. Full name Marcell Doyle	Date (Mo., Day, Year)	Amount of each
Mailing Address 28 Jiamy Circle	/_/_	disbursement this period
City, State, Zip Code Lambert, MS 38643	10,31,10	\$ 300.00
Purpose of Disbursement (Optional) Distribute campaign flyers. Different towns.	Aggregate Year-to-date	\$ 300.00
C. Full name North Miss. Buisness Products	Date	Amount of each
Mailing Address 223 Sharkey Avenue	(Mo., Day, Year)	disbursement this period \$642.00
City, State, Zip Code Clarksdale, MS 38614		\$
Purpose of Disbursement (Options) Print campaign flyers.	Aggregate Year-to-date	5 642.00
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	11	S
ity, State, Zip Gode		5
Purpose of Disbursement (Optional)	Aggregate Year-to-date	5
. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
siling Address		5
ity, State, Zip Code		5
urpose of Disbursement (Optional)	Aggregate Year-to-date	s
Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
illing Address		S Graphing Chile beund
ly, State, Zip Code		5
rpose of Disbursement (Optional)		

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